## Secretary of State Voter Registration Product Order Form

## Electronic Formats and Lists

| ☐ E-mail   | \$20.00         |  |  |
|--|-----------------|--|--|
| Statewide Voter Registration List  |                 |  |  |
| ☐ State alpha list of <u>all</u> voters.   |                 |  |  |
| ☐ State alpha list of all voters <u>one</u> party (check one): ☐ R ☐ D ☐ L ☐ Other   |                 |  |  |
|  |                 |  |  |
| Legislative Voter Registration List HD SD  |                 |  |  |
| ☐ Alpha list of all voters.  |                 |  |  |
| ☐ Alpha list of <u>all</u> voters in HD or SD sorted by district - precinct.   |                 |  |  |
| ☐ Alpha list of voters' one party, sorted by district - precinct. ☐ R ☐ D ☐ L ☐ Other  |                 |  |  |
|  |                 |  |  |
| County Voter Registration List County Name   | c County Number |  |  |
| ☐ Alpha list of <u>all</u> voters within a county.   |                 |  |  |
| $\square$ County alpha list, voters by party, sorted by district - precinct (check one): $\square$ R $\square$ D $\square$ L $\square$ Other $\square$ All |                 |  |  |

This form can be accessed on the Secretary of State's website at:  $\underline{soswy.state.wy.us/election/forms.htm}$ 

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|       | I hereby affirm that I am requesting voter registration data in       | the capacity of (check and complete the appropriate category):   |
|-------|---|--|
|       | Candidate for political office  |  |
|       | Officer of candidate's campaign committee                             | Office Title   |
|       |   | Title  |
|       |   | Name of Committee  |
|       | Officer of political party central committee                          | Title  |
| П     | Elected official_   | Name of Committee  |
|       |   | Office Title   |
|       | Officer of political action committee                                 | Title  |
|       |   | Name of Committee  |
|       | Individual promoting or opposing a ballot issue                       |  |
|       | Individual promoting or opposing a candidate                          | Ballot Issue   |
|       |   | Candidate's Name   |
| Ш     | Representative of organization promoting voter participation          | 1 Title  |
|       |   | Name of Organization   |
| allov | ved by W.S. 22-2-113(a), but if the data is provided to others, I mus | t I may reproduce the registration data for <u>political purposes only</u> , as st notify subsequent parties of the statutory prohibition against using 22-2-113(a) may be prosecuted as misdemean or sunder W.S. 22-26-112. |
|       | Signature of Affiant  | Date   |
|       |   |  |
|       | Name  | Return the completed form, oath and pre-payment to:<br>Wyoming Secretary of State<br>Elections Division  |
|       | Mailing Address   | 200 West 24 <sup>th</sup> Street<br>Cheyenne, WY 82002-0020  |
|       | City, State, Zip  |  |
|       | Telephone   |  |
|       | E-mail Address (be sure to provide for e-mail requests)               |  |

If you have any questions regarding the completion of this form, contact the Elections Division at the Secretary of State's Office at (307) 777-3416 or via e-mail at  $\underline{kschon@state.wy.us.}$